	Ellective October 1, 2	2003	107/	, /
- CLAIN	MS AS FILED - PART	10/65 366		
TOTAL CLAIMS	(Column 1)	(Column 2)	SMALL ENTITY TYPE	OTHER THAN
FOR			QI.	SMALL ENTITY
TOTAL CHARGEABLE CLAI	NUMBER FILED	NUMBER EXTRA	BASIC FEE 305 00	RATE FEE
INDEPENDENT CLAIMS	MS minus 20=	*	OR OR	BASIC FEE 770.00
	minus 3 =	*	X\$ 9= OR	X\$18=
MULTIPLE DEPENDENT CLA	X43= OR	X86=		
* If the difference in column	1 is less than zero, enter "	'0" in and	+145= OR	+290=
CLAIMS A	S AMENDED - PART	o in column 2	TOTAL	TOTAL
Tooluiliii	1) (Column			
CLAIMS REMAINING AFTER	G HIGHES NUMBER	T (Section 11 S)	UR S	OTHER THAN MALL ENTITY
REMAINING AFTER AMENDMEN		SLY PRESENT	BATE TION	ADDI-
Independent *	Minus **	=======================================	FEE	RATE TIONAL FEE
	Minus ***	=	X\$ 9= OR X	\$18=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  OR X\$18=  X43=  OR X\$6=				
6/2/2			+145= OR +2	90=
(Column 1)	(Calus a		ADDIT FEE	OTAL
CLAIMS REMAINING	(Column 2) HIGHEST NUMBER	1,5 = 1,5 (1,1)	ADDIT	FEE
AFTER AMENDMENT	PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE TIONAL DA	ADDI-
Total + Independent +	Minus ** 7/)	=	FEE HA	TE TIONAL FEE
Independent + 3	Minus *** 3	1	X\$ 9= OR X\$1	
FIRST PRESENTATION OF MU	ILTIPLE DEPENDENT CLAIM	И	X43= OR X86	_
			+145-	
(Column 1)		L A	TOTAL OR +290 DDIT. FEE OR TOT	
CLAIMS REMAINING	(Column 2) HIGHEST	(Column 3)	ADDIT. F	EE
AFTER AMENDMENT	NUMBER PREVIOUSLY	PRESENT	ADDI-	1.5
Total	PAID FOR	EXTRA	RATE TIONAL RATE	ADDI- TIONAL
ndependent * M	ious	=	X\$ 9=	FEE
IRST PRESENTATION OF MULT	IPLE DEPENDENT CLAIM	=      -	OR X\$18=	+
19 entry In and				
he entry in column 1 is less than the entry in column 2, write "0" in column 3.  he "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20."  ADDIT FEE				
Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20. ADDIT FEE				
2-878 (Rev. 10/03)		ghest number found in	the appropriate box in column 1.	